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**FAX TRANSMISSION****DATE:** September 27, 2006**PTO IDENTIFIER:** Application Number 10/010,403-Conf. #4474  
Patent Number**Inventor:** Gregory S. Bower et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** RADER, FISHMAN & GRAUER PLLC  
Glenn E. Forbis**PHONE:** (248) 594-0636**Attorney Dkt. #:** 65783-0009**PAGES (Including Cover Sheet):** 30

**CONTENTS:** Fee Transmittal (1 page)  
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Amendment in Response to Non-Final Office Action (25 pages)  
Amendment Transmittal (1 page)  
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Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 10/010,403

Attorney Docket No.: 65783-0009

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on September 27, 2006  
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Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Amendment in Response to Non-Final Office Action (25 pages)

Amendment Transmittal (1 page)

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PTO/SB/17 (07-06)

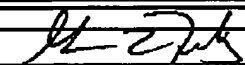
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number 10/010,403-Conf. #4474 Filing Date December 7, 2001 First Named Inventor Gregory S. Bower Examiner Name P. C. Wilder Art Unit 2623 Attorney Docket No. 65783-0009	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 1,420.00			

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.15 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

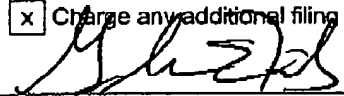
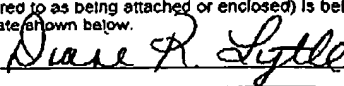
<b>FEE CALCULATION</b>								
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>								
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>			
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fees Paid (\$)</b>	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
<b>2. EXCESS CLAIM FEES</b>								
							<b>Small Entity</b> <b>Fee (\$)</b>	
<b>Fee Description</b>							<b>Fee (\$)</b>	
Each claim over 20 (including Reissues)							50	
Each independent claim over 3 (including Reissues)							200	
Multiple dependent claims							360	
<b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b>							<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b>	
42 - 48 = _____ x _____ = _____								
HP = highest number of total claims paid for, if greater than 20.								
<b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b>								
11 - 9 = 2 x 200.00 = 400.00								
HP = highest number of independent claims paid for, if greater than 3.								
<b>3. APPLICATION SIZE FEE</b>								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<b>Total Sheets</b>		<b>Extra Sheets</b>		<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b> <b>Fee Paid (\$)</b>		
_____ - 100 = _____		/50		_____ (round up to a whole number) x _____ = _____				
<b>4. OTHER FEE(S)</b>								
Non-English Specification, \$130 fee (no small entity discount)							<b>Fees Paid (\$)</b>	
Other (e.g., late filing surcharge): 1253 Extension for response within third month							1,020.00	

<b>SUBMITTED BY</b>			
Signature 	Registration No. (Attorney/Agent) 40,610	Telephone (248) 594-0636	
Name (Print/Type) Glenn E. Forbis		Date September 27, 2006	

<b>Fee Transmittal</b>	
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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 65783-0009	
Application No. 10/010,403-Conf. #4474		Filing Date December 7, 2001		Examiner P. C. Wilder	
				Art Unit 2623	
Applicant(s): Gregory S. Bower et al.					
Invention: METHOD AND APPARATUS FOR INTERFACING VARIOUS AUDIOVISUAL DEVICES WITH A DIGITAL DATA NETWORK					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	42	- 48 =		x	
Independent Claims	11	- 9 =	2	x 200.00	400.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					1,020.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>1,420.00</b>
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span> <input type="checkbox"/> No additional fee is required for this amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-0013</u> in the amount of \$ <u>1,420.00</u> . A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Glenn E. Forbis Attorney/Agent Reg. No.: 40,610  RADER, FISHMAN & GRAUER PLLC 39533 Woodward Avenue Suite 140 Bloomfield Hills, Michigan 48304 (248) 594-0636				Dated: <u>September 27, 2006</u>	
Amendment Transmittal					
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Dated: September 27, 2006		Signature:  (Diane R. Lytle)			